

Interview Summary	Application No. 10/730,174	Applicant(s) ZOSO ET AL.	
	Examiner CHAT C. DO	Art Unit 2193	

All participants (applicant, applicant's representative, PTO personnel):

(1) CHAT C. DO. (3)_____.

(2) Clingan Jim, Reg. No. 30,163. (4)_____.

Date of Interview: 25 February 2008.

Type: a) ☒ Telephonic b) ☐ Video Conference
c) ☐ Personal [copy given to: 1) ☐ applicant 2) ☐ applicant's representative]

Exhibit shown or demonstration conducted: d) ☐ Yes e) ☒ No.

If Yes, brief description: _____.

Claim(s) discussed: 16.

Identification of prior art discussed: None.

Agreement with respect to the claims f) ☒ was reached. g) ☐ was not reached. h) ☐ N/A.

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: The examiner initiated a call to the attorney of record, after reviewing the appeal brief with WQAS, to discuss the 101 issue of claim 16. Upon the discussion, the attorney of record, Mr. Clingan Jim, agreed with the examiner to amend the claim 16. The proposed claim 16 is latter sent to the examiner for Examiner Amendment. the proposed claims 16-18 are pending and other claims are cancelled.

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER OF ONE MONTH OR THIRTY DAYS FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

/Chat C. Do/
Primary Examiner, Art Unit 2193

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

Examiner's signature, if required